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CONFIRMATION NO. 9188

SERIAL NUMBER 10/698,077	FILING OR 371(c) DATE 10/29/2003 RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. 02486.0067.NPUS01
APPLICANTS Cynthia B. Robinson, Wayne, PA; Howard A. Ball, Kendall Park, NJ; ** CONTINUING DATA ***** This appln claims benefit of 60/492,229 07/31/2003 ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 02/06/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		STATE OR COUNTRY PA	SHEETS DRAWING 15	TOTAL CLAIMS 18
INDEPENDENT CLAIMS 1				
ADDRESS WILSON SONSINI GOODRICH & ROSATI, PC ATTN: ALBERT P. HALLUIN 650 PAGE MILL ROAD PALO ALTO, CA94304-1050				
TITLE Combination of dehydroepiandrosterone or dehydroepiandrosterone-sulfate with a PDE-4 inhibitor for treatment of asthma or chronic obstructive pulmonary disease				
FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	